CANDIDATE / OFFICEHOLDER					
CAMPAIGN	<b>FINANCE</b>	REPORT			

#### FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION this form.	N GUIDE explains how to complete 1 ACCOUN (Ethics Con	T# 2 To	otal pages filed:
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR FIRST  Mark  NICKNAME LAST	MI Date F	OFFICE USE ONLY
	Goldberg	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE #; CITY; ST  405 Main, Suite 500  Houston, TX 77002	ATE; ZIP CODE  Delle He	RECEIVED AND And develved of Dale Postmarked ONY SECRETARY
OFFICEHOLDER PHONE	(713)861-1117	Receip	Amount
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Alan NICKNAME LAST	MI Date Pe	roceced
	Helfman		
7 CAMPAIGN TREASURER ADDRESS (Residence or business) 8 CAMPAIGN TREASURER PHONE	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CIT  4807 Kirby  Houston, TX 77098  AREA CODE PHONE NUMBER EXT  ( 713) 524-3801	Y; STATE; ZIP CO	
REPORTTYPE	January 15 X 30th day before election Au	арр	h day aller campaign treasurer tointment (officeholder only) al report (Altach C/OH - FR)
0 PERIOD COVERED	Month Day Year THROUGH	Month Day Year 9 / 25/ 200	i
1 ELECTION	Month Day Year ELECTION TYPE  9 4 2003 Primary Flunc	off Ageneral	Special
2 OFFICE	orfice Mello (I any)  Ouston City Council, Dist. C	CESOUGHT (W known) Houston Cit	ty Council, Dist
4 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	Direct campaign expenditures are campaign expenditures made by o Candidates are required to disclose this information only if they receive a Name	thore will bout the condidate le - i-	
}-	Address / PO Box; Apt. / Suite #; City; State; Zip Code		
additional pages			
<del></del>	GO TO PAGE 2		

	F.O. BOX 12		(512) 463-580	1 800-025-8
SUPPOR	TE/OFFI T&TOTA	CEHOLDER REPORT: LS		FORM C/OF SHEET PG 2
15 C/OH NAME Mar	k Goldber	g	16ACCOUNT	#(Elhics Commission filers)
17 NOTICE FROM POLITICAL COMMITTEE(S)	•• This box is for n may have been mad this information only	office of political expenditures by political committees to support the candidate without the candidate's or officeholder's knowledge or consent. Candidate if they receive notice of such expenditures.	date / officeholder. les and officeholde	These expenditures ers are required to report
3 3	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL SPECIFIC	COMMITTEE ADDRESS		
uddinona) pages		COMMITTEE CAMPAIGN TREASURER NAME	<u>.</u>	
		COMMITTEE CAMPAIGN TREASURER ADDRESS		<del></del>
18 CONTRIBUTION TOTALS	1. TOTAL (	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	
	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 31,7	18.00
EXPENDITURE TOTALS	3. TOTAL P	OLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	<b>I</b>	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 13,1	43.31
CONTRIBUTION BALANCE	5. TOTAL PO	DLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY RTING PERIOD	\$ 77,7	19.36
OUTSTANDING LOAN TOTALS	6. TOTAL PE	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE	<b> </b>	
AFFIDAVIT ELI	A M SCHUBERT UTARY PUBLIC Buts of Texas 19. Exp. 12/05/2004	I swear, or affirm, under penalty of perjuis true and correct and includes all informe under Title 15, Election Code.	iry, that the accomation required	ompanying report to be reported by
AFFIX NOTARY STAMP /		Signature of Candidate	or Officehold	
worn to and subscribe		which, witness my hand and seal of office.	nis the	day
Cllo M. So. Signature of officer admir	histering oath	Frinted name of officer administering oath  Title of o	otay fu	Iblr c

The Instruction Guide explains how to complete this form.				Total pages this Schedule A: 12	
FILER NAM	1E: Mark Goldberg		ACCOUNT # (Ethics Commission filer		
<b>Date</b> 7-1-2003	Full name of contributor out of state PAC ID#  Sajju George  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$50.00	In-kind contribution description (if available)	
Principal	occupation/Job Title (See Instructions)	Employ	er (See Instructions)		
<b>Date</b> 7-2-2003	Full name of contributor out ot state PAC ID#  Dr. Melton Horwitz  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$250.00	In-kind contribution description (if available)	
Principal	occupation/Job Title (See Instructions)	Employe	er (See Instructions)		
<b>Date</b> 7-2-2003	Full name of contributor  out of state PAC 1D# C00000  JP Morgan Chase & Co. State & Federal P.  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$250.00	In-kind contribution description (if available)	
Principal o	occupation/Job Title (See Instructions)	Employe	er (See Instructions)		
<b>Date</b> 7-6-2003	Full name of contributor out ot state PAC ID#_  Jamie Brewster  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$500.00	In-Kind contribution description (if available)	
Principal o	occupation/Job Title (See Instructions)	Employe	r (See Instructions)		
<b>Date</b> 7-6-2003	Full name of contributor out of state PAC ID#  Stephen M. Fraga  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$100.00	In-kind contribution description (if available)	
Principal c	occupation/Job Title (See Instructions)	Employe	r (See Instructions)		

The Instructi	ion Guide explains how to complete this form.			Total pages this Schedule A: 12
FILER NAME	: Mark Goldberg			ACCOUNT # (Ethics Commission filers)
Date	Full name of contributor out ot state PAC ID#	<del></del>	Amount of contribution (\$)	in-kind contribution description (if available)
7-9-2003	Leonard Alpert		\$50.00	
	Contributor address; City; State; Zip Code		, 450,600	
1				
Principal o	ccupation/Job Title (Sec Instructions)	Employe	er (See Instructions)	
Date	Full name of contributor out ot state PAC ID#		Amount of	In-kind contribution
7-9-2003	Mary Kay Morton		contribution (\$)	description (if available)
	Contributor address; City; State; Zip Code		\$500.00	
	VI-1 Title (Con Instructions)	Employe	r (See Instructions)	<u> </u>
Principal o	ccupation/Job Title (See Instructions)	Employe	r (See instructions,	
Date	Full name of contributor out ot state PAC ID#		Amount of contribution (\$)	In-kind contribution description (if available)
7-10-2003	R. Bruce LaBoon		\$1,000.00	,
	Contributor address: City; State; Zip Code		φ1,000.00	
		Freelows	(C Trateriations)	<u> </u>
Principal o	ccupation/Job Title (See Instructions)	Employe	r (See Instructions)	<del></del>
Date	Full name of contributor out ot state PAC ID#		Amount of contribution (\$)	In-kind contribution description (if available)
7-14-2003	Robert S. Parks		\$700.00	
	Contributor address; City; State; Zip Code		\$700.00	
•				
· <del></del>			/O T / // /	
Principal o	ccupation/Job Title (See Instructions)	Employe	r (See Instructions)	
Date	Full name of contributor out ot state PAC ID#	<u> </u>	Amount of	In-kind contribution
7-15-2003	Richard W. Weekley		contribution (\$)	description (if available)
	Contributor address; City; State; Zip Code		\$500.00	
1				
Principal o	ccupation/Job Title (See Instructions)	Employe	r (See Instructions)	

The Instruction Guide explains how to complete this form.  FILER NAME: Mark Goldberg			Total pages this Schedule A: 12	
			ACCOUNT # (Ethics Commission filers)	
Date 7-22-2003	Full name of contributor out ot state PAC ID#  William Franks  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	r (See Instructions)	
Date 7-22-2003	Full name of contributor out of state PAC ID# TREPAC / Texas Association of Realtors  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$500.00	in-kind contribution description (if available)
Principal c	occupation/Job Title (See Instructions)	Employe	r (See Instructions)	
Date 8-2-2003	Full name of contributor out ot state PAC 1D#  Linda Pravda Horowitz  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$18.00	In-kind contribution description (if available)
Principal c	occupation/Job Title (See Instructions)	Employe	r (See Instructions)	
Date 8-4-2003	Full name of contributor out ot state PAC ID#  Robert Cohen  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
Principal o	occupation/Job Title (See Instructions)	Employe	r (See Instructions)	
Date 8-15-2003	Full name of contributor out of state PAC ID#  Tammy Tran  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$5,000.00	In-kind contribution description (if available)
Principal of	occupation/Job Title (See Instructions)	Employe	r (See Instructions)	

The Instruction Guide explains how to complete this form.  FILER NAME: Mark Goldberg			Total pages this Schedule A: 12	
			ACCOUNT # (Ethics Commission filers)	
Date 8-21-2003	Full name of contributor out of state PAC ID#  Mark Getz  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$500.00	In-kind contribution description (If avaliable)
Principal o	ccupation/Job Title (See Instructions)	Employe	r (See Instructions)	
Date 8-22-2003	Full name of contributor out of state PAC 1D#  William J. Hill  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$2,500.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 8-26-2003	Full name of contributor out of state PAC ID#  L.S. Platou  Contributor address; City; State; Zip Code		Amount of contribution (\$)	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 8-26-2003	Full name of contributor out of state PAC ID#  Henry J.N. Taub  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$300.00	In-kind contribution description (if available)
Principal o	occupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 8-29-2003	Full name of contributor out of state PAC ID#  Jeffrey Bricker  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
Principal c	occupation/Job Title (See Instructions)	Employe	er (See Instructions)	

The Instruction Guide explains how to complete this form.			Total pages this Schedule A: 12	
FILER NAME	: Mark Goldberg			ACCOUNT # (Ethics Commission tilers)
<b>Date</b> 9-10-2003	James A. Binkley  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-10-2003	Full name of contributor out of state PAC ID#  Chris Claunch  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-10-2003	Full name of contributor out of state PAC ID#  Ted Hirtz  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-11-2003	Full name of contributor out of state PAC ID#  Deborah J. Anders  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$25.00	In-kind contribution description (if available)
Principal o	occupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-11-2003	Full name of contributor out of state PAC ID#  Chase Untermeyer  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
Principal	occupation/Job Title (See Instructions)	Employe	er (See Instructions)	

The Instruction Guide explains how to complete this form.				Total pages this Schedule A: 12
FILER NAME:	Mark Goldberg			ACCOUNT # (Ethics Commission filers)
Date 9-12-2003	Full name of contributor out of state PAC ID#  Lyle Henkel  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
Principal oc	ccupation/Job Title (See Instructions)	Employe	r (See Instructions)	
Date 9-13-2003	Full name of contributor out of state PAC ID#  Lester Marks  Contributor address: City; State; Zip Code		Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
Principal o	cupation/Job Title (See Instructions)	Employe	r (See Instructions)	
<b>Date</b> 9-15-2003	Full name of contributor out of state PAC ID#  Giorgio Borlenghi  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-15-2003	Full name of contributor out of state PAC ID#  John Burns  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$250.00	in-kind contribution description (if avaliable)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-15-2003	Full name of contributor out of state PAC ID#  Dory Gordon  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	

The Instruction Guide explains how to complete this form.			Total pages this Schedule A: 12	
FILER NAME	: Mark Goldberg			ACCOUNT # (Ethics Commission filers)
Date 9-15-2003	Full name of contributor out of state PAC ID#  Kyle Teas  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$25.00	In-kind contribution description (if available)
Principal or	ccupation/Job Title (See Instructions)	Employe	r (See Instructions)	
Timerpar	ccupation Job			
Date 9-17-2003	Full name of contributor out of state PAC ID#  Linebarger, Goggan, Blair & Sampson, LLP  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	r (See Instructions)	
Timelpar	Coupation			
Date 9-17-2003	Full name of contributor out of state PAC ID#  David Killen  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$50.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	r (See Instructions)	
Date 9-17-2003	Full name of contributor out of state PAC ID#  Cheryl Thompson-Draper  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$200.00	In-kind contribution description (if available)
Dula simple	respection / Job Title (See Instructions)	Employe	er (See Instructions)	<u> </u>
Principal	occupation/Job Title (See Instructions)	<u> </u>		
Date 9-18-2003	Full name of contributor out of state PAC ID#  Stuart Kensinger  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
Principal of	occupation/Job Title (See Instructions)	Employe	er (See Instructions)	

The Instruction Guide explains how to complete this form.  FILER NAME: Mark Goldberg			Total pages this Schedule A: 12	
			ACCOUNT # (Ethics Commission filers)	
Date 9-19-2003	Full name of contributor out of state PAC ID#  D. Fred Martinez  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	r (See Instructions)	
Date 9-19-2003	Full name of contributor out of state PAC ID#  George W. Strake, Jr.  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	r (See Instructions)	
Date 9-20-2003	Full name of contributor out of state PAC ID#  Darryl Carter  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-20-2003	Full name of contributor out of state PAC ID#  Matthew Khourie  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-21-2003	Full name of contributor out of state PAC ID#  Perry Radoff  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
Deincipal of	erupation/Job Title (See Instructions)	Employe	er (See Instructions)	

The Instruction Guide explains how to complete this form.			Total pages this Schedule A: 12	
FILER NAME	: Mark Goldberg			ACCOUNT # (Ethics Commission filers)
Date 9-22-2003	Full name of contributor out of state PAC ID#  Stanford Alexander  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code	<u> </u>		
Principal or	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-22-2003	Full name of contributor out of state PAC ID#  Bernard Aptaker  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$2,500.00	in-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
			Amount of	In-kind contribution
Date 9-22-2003	Jack S. Blanton, Jr.		samount or contribution (\$)	description (if available)
	Contributor address; City; State; Zip Code			
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-22-2003	Full name of contributor out ot state PAC 1D#		Amount of contribution (\$)	In-kind contribution description (if available)
	Contributor address: City; State; Zip Code		\$1,000.00	
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-23-2003	Full name of contributor out of state PAC ID#  Charles Bellomy  Contributor address; City; State; Zip Code		Amount of contribution (\$)	In-kind contribution description (if available)
	coupation/Job Title (See Instructions)	Employ(	er (See Instructions)	

The Instruction Guide explains how to complete this form.			Total pages this Schedule A: 12	
FILER NAME	: Mark Goldberg			ACCOUNT # (Ethics Commission filers)
Date 9-23-2003	Full name of contributor out ot state PAC ID#		Amount of contribution (\$)	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code			
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	· · · · · · · · · · · · · · · · · · ·
Date 9-23-2003	Full name of contributor out of state PAC ID#  Stephen Lasher  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-23-2003	Full name of contributor out of state PAC 1D#  Dudley Smith  Contributor address: City; State; Zip Code		Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-23-2003	Full name of contributor out of state PAC ID#  Henry J.N. Taub  Contributor address; City; State; Zip Code		Amount of contribution (\$)	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employe	er (See Instructions)	
Date 9-23-2003	Full name of contributor out of state PAC ID#  Richard W. Weekley  Contributor address; City; State; Zip Code		Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
Principal c	occupation/Job Title (See Instructions)	Employe	er (See Instructions)	

## POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

#### SCHEDULE A

The Instruc	etion Guide explains how to complete this form.	Total pages this Schedule A: 12  ACCOUNT # (Ethics Commission filers		
FILER NAM	E: Mark Goldberg			
Date 9-24-2003	Full name of contributor out of state PAC ID#  Charles Foster  Contributor address: City: State; Zip Code		Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
Principal	occupation/Job Title (See Instructions)	Employer	(See Instructions)	
Date 9-24-2003	Full name of contributor out of state PAC ID#  A.L. Keller  Contributor address: City: State; Zip Code		Amount of contribution (\$) \$50.00	In-kind contribution description (if available)
Principal o	occupation/Job Title (See Instructions)	Employer	(See Instructions)	
Date 9-24-2003	Full name of contributor out of state PAC ID#  Clive Runnells  Contributor address; City; State; Zlp Code		Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
Principal o	occupation/Job Title (See Instructions)	Employer	(See Instructions)	
Date 9-24-2003	Full name of contributor out of state PAC ID#  David Wang  Contributor address; Clty; State; Zip Code		Amount of contribution (\$) \$2,500.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employer	(See Instructions)	
Date 9-24-2003	Full name of contributor out ot state PAC  D# Reid Wilson  Contributor addresser City: State; Zip Code		Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
Principal o	ccupation/Job Title (See Instructions)	Employer	(See Instructions)	

POLITICAL CONTRIBUTIONS
- OTHER THAN PLEDGES OR LOANS

### SCHEDULE A

The Instruction Guide explains how to complete this form.			Total pages this Schedule A: 12
FILER NAME	: Mark Goldberg		ACCOUNT # (Ethics Commission filers)
Date 9-25-2003	Full name of contributor out ot state PAC ID#  Hoover Slovacek LLP	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
,	Contributor address; City; State; Zip Code		
Principal o	ccupation/Job Title (See Instructions)	Employer (See Instructions)	

The Instruction	on Guide explains how to comp		Total pages Schedule F: 5	
FILER NAME:	Mark Goldberg		Α	ACCOUNT #: (Ethics Commission fil
Date 7/1/03	Payee name Kight Printing 5750 Bintliff, Ste. 202 Houston, TX 77036	Payee address		Amount (\$) \$1,392.81
Purpose of expend Printing	titure (See instructions regarding type of	information required.)	** Complete if dir Candidate / Offic	rect expenditure to benefit C/OH ** ceholder name Office sought / held
Date 7/8/03	Payee name Sprint PCS 6809 Southwest Frwy. Houston, TX 77074	Payee address		Amount (\$) \$50.00
Purpose of expend Cell phone ser	liture (See instructions regarding type of vice	information required.)	** Complete if dire Candidate / Office	ect expenditure to benefit C/OH ** eholder name Office sought / held
Date 7/16/03	Payee name Kelli Glanz 2617C W. Holcombe Blvd Houston, TX 77025	Payee address		Amount (\$) \$122.59
	iture (See instructions regarding type of int for miscellaneous campaign	•	** Complete if dire Candidate / Office	ect expenditure to benefit C/OH ** cholder name Office sought / held
Date 7/22/03	Payee name Leadership Houston 3015 Richmond Houston, TX 77098	Payee address		Amount (\$) \$100.00
Purpose of expendi Dues	ture (See instructions regarding type of i	nformation required.)	** Complete if dired Candidate / Office	ct expenditure to benefit C/OH ** holder name Office sought / held
Date 7/22/03	Payee name Shell Houston Open 5810 Wilson Road, Ste. 11 Humble, TX 77396	Payee address		Amount (\$) \$317.12
Purpose of expendi Event tickets	ture (See instructions regarding type of in	nformation required.)	** Complete if direc Candidate / Officel	nt expenditure to benefit C/OH ** cholder name Office sought / held

The Instruction Guide explains how to complete this form.			Total pages Schedule F: 5
filer name: Mark Goldberg			ACCOUNT #: (Ethics Commission file
Date 7/22/03	Payee name Payee address LULAC 3004 Bagby Houston, TX 77006		Amount (\$) \$80.00
Purpose of expend Donation	iture (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** officeholder name Office sought / held
Date 7/22/03	Payce name Payce address Fiesta Patrias Parade PO Box 262871 Houston, TX 77207		Amount (\$) \$200.00
Purpose of expending Parade entry f	iture (See instructions regarding type of information required.) ee		direct expenditure to benefit C/OH ** fficeholder name Office sought / held
Date 7/23/03	Payee name Payee address MABAH 1912 Norfolk Houston, TX 77098		Amount (\$) \$200.00
Purpose of expendi Sponsorship o	iture (See instructions regarding type of information required.) f event		direct expenditure to benefit C/OH ** fficeholder name Office sought / held
Date 7/24/03	Payee name Payee address Houston Library Board 500 McKinney Houston, TX 77002		Amount (\$) \$100.00
Purpose of expendi Event fee	ture (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** ficeholder name Office sought / held
Date 7/24/03	Payee name Payee address Computer Rescue & Network Servies, Inc. 8333 Egregbay, Ste. 270 Houston, TX 77058		Amount (\$) \$115.00
Purpose of expendi	ture (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** ficeholder name Office sought / held

The Instruction	on Guide explains how to complete this form.	Т	otal pages Schedule F: 5	
FILER NAME:	Mark Goldberg	AC	COUNT #: (Ethics Commission file	
Date 8/8/03	Payee name Payee address Sprint PCS 6809 Southwest Frwy. Houston, TX 77074		Amount (\$) \$50.00	
Purpose of expend	liture (See instructions regarding type of information required.) rvice	** Complete if direct expenditure to benefit C/OH ** Candidate / Officelolder name Office sought / held		
Date 8/12/03	Payee name Payee address Buffalo Soldier Museum 1834 Southmore Houston, TX 77004		Amount (\$) \$500.00	
Purpose of expend	iture (See instructions regarding type of information required.)	** Complete if direct Candidate / Officeh	t expenditure to benefit C/OH ** older name Office sought / held	
Date 8/13/03	Payee name Payee address Riverstate Golf Tournament 601 Pennsylvania Ave. PMB #269 Washington, DC 20004		Amount (\$) \$500.00	
Purpose of expending Sponsorship of the second seco	iture (See instructions regarding type of information required.)  of event	** Complete if direct Candidate / Officeho	expenditure to benefit C/OH ** older name Office sought / held	
Date 8/14/03	Payee name Payee address CRHC 3405 Edloe Houston, TX 77027		Amount (\$) \$5,000.00	
Purpose of expendi Mail out	ture (See instructions regarding type of information required.)	** Complete if direct Candidate / Officeho	expenditure to benefit C/OH ** Ider name Office sought / held	
Date 8/22/03	Payee name Payee address Vietnamese Community of Houston and Vicinity 2615 Fannin Houston, TX 77002		Amount (\$) \$500.00	
Purpose of expendit Sponsorship of	ture (See instructions regarding type of information required.) f event	** Complete if direct e Candidate / Officeho	expenditure to benefit C/OH **  Ider name Office sought / held	

The Instruction Guide explains how to complete this form.			Total pages Schedule F: 5	
FILER NAME:	Mark Goldberg		ACCOUNT #: (Ethics Commission file	
Date 9/2/03	Payee name Payee address Young Israel of Houston PO Box 710447 Houston, TX 77271	_	Amount (\$) \$270.00	
Purpose of expend	diture (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** ticeholder name Office sought / held	
Date 9/3/03	Payee name Payee address Computer Rescue & Network Servies, Inc. 8333 Egregbay, Ste. 270 Houston, TX 77058		Amount (\$) \$150.00	
Purpose of expend Computer rep	liture (See instructions regarding type of information required.)		irect expenditure to benefit C/OH ** ficeholder πame Office sought / held	
Date 9/8/03	Payee name Payee address Sprint PCS 6809 Southwest Frwy. Houston, TX 77074		Amount (\$) \$50.00	
Purpose of expend Cell phone ser	iture (See instructions regarding type of information required.)		irect expenditure to benefit C/OH ** iceholder name Office sought / held	
Date 9/18/03	Payee name Payee address American Jewish Committee 3336 Richmond Houston, TX 77098		Amount (\$) \$100.00	
Purpose of expend Event ticket	iture (See instructions regarding type of information required.)	** Complete if di Candidate / Offi	rect expenditure to benefit C/OH ** ceholder name Office sought / held	
Date 9/18/03	Payee name Payee address American Jewish Committee 3336 Richmond Houston, TX 77098		Amount (\$) \$1,500.00	
Purpose of expendi Donation	iture (See instructions regarding type of information required.)	** Complete if di Candidate / Offic	rect expenditure to benefit C/OH ** ceholder name Office sought / held	

The Instruction Guide explains how to complete this form.			Total pages Schedule F: 5	
FILER NAME:	Mark Goldberg			ACCOUNT #: (Ethics Commission fi
Date 9/18/03	Payee name Jewish Herald-Voice 3403 Audley Houston, TX 77098	Payee address		Amount (\$) \$370.00
Purpose of expendi	iture (See instructions regarding type of i	nformation required.)	** Complete i Candidate / G	if direct expenditure to benefit C/OH ** Officeholder name Office sought / held
Date 9/18/03	Payee name City of Houston 900 Bagby Houston, TX 77002	Payee address	,	Amount (\$) \$500.00
Purpose of expend	iture (See instructions regarding type of	information required.)	** Complete i Candidate / C	if direct expenditure to benefit C/OH ** Officeholder name Office sought / held
Date 9/18/03	Payee name WC Management 402 West 16th Street Houston, TX 77008	Payee address		Amount (\$) \$975.79
Purpose of expend Voter list	iture (See instructions regarding type of	information required.)	** Complete i Candidate / C	if direct expenditure to benefit C/OH ** Officeholder name Office sought / held